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07/11/2008

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(Depositor's name) (Signature) (Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO

10/661,369	09/11/2003		Nelson Yew	***************************************	5042C	6689
FITLE OF INVENTION	: EXPRESSION VECTO	RS CONTAINING HY	BRID UBIQUITIN PROM	OTERS		
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APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DA'FE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	10/14/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
KETTER, JAMES S		1636	435-320100		•	
. Change of correspond	ence address or indication	of "Fee Address" (37	2. For printing on the p		· .	***************************************
CFR 1.363). Change of correspondence address for Change of Correspondence.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.					era 2	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			registered attorney or agent) and the names of up to			
Number is required.			2 registered patent attorneys or agents. If no name is 3.			
ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or tyr	e)		
PLEASE NOTE: Un	ess an assignee is identif	ied below, no assignee	data will appear on the part of a substitute for filing an	itent. If an assignee is id	entified below, the docu	ment has been filed
(A) NAME OF ASSI		etion of this form is NO	(B) RESIDENCE: (CITY			
			CAMBRIDGE,		K1)	
GENZYME CO	ORPORATION		CAMBRIDGE,	MA 02142		
lease check the appropr	iate assignee category or	estegories (will not be n	rinted on the natent) .	Individual XXI Comorati	on or other private group	entity Governm
a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapply any prev	iously paid issue fee sho	wn above)
Issue Fee			A check is enclosed			
Publication Fee (N	lo small entity discount po	ermitted)	Payment by credit card. Form PTO-2038 is attached The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-1074. (enclose an extra copy of this form)			
Advance Order	of Copies 5		overpayment, to Depo	sit Account Number 07-	-1074 (enclose an ex	tra copy of this form
. Change in Entity Sta	tus (from status indicated	above)				***************************************
a. Applicant claim	s SMALL ENTITY status	. See 37 CFR 1.27.	☐ b. Applicant is no long	er claiming SMALL ENT	TTY status. See 37 CFR 1	1.27(g)(2).
NOTE: The Issue Fee an nterest as shown by the	d Publication Fee (if requ records of the United State	ired) will not be accepte as Patent and Trademass	d from anyone other than the Office.	ne applicant; a registered a	ttomey or agent; or the as	ssignee or other part
Authorized Signature	- Year	Jan Star	wagnish		10/11/08	***************************************
Typed or printed nam	Jennifer	D. Tousignan	t	Registration No.	54,498	
his collection of inform	ation is required by 37 CF	R 1 311 The information	on is required to obtain or r	etain a benefit by the publ	ic which is to file (and by	the LISPTO to proc

This collection of information is required by 7 CFR 1.311. The information is required to obtain or retain a kenefit by the public which is to file (and by the USPTO or process) an application. Conflication is presented by 51 USC 1.22 and 97 GFR 1.41 This collection is estimated to easy 22 minutes to complete, including gathering, preparing, and the confliction of the confliction of the confliction of the USPTO. Time will very depending upon the individual to easy 22 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden, should be sent to the Chefr Information Officer, U.S., Pattern and Trademark (U.S. Department of Commerce, Po. Box 1450, Alexandria, Virginia 2231-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 2231-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number